	C		- 4 D		C D l. l.: -	II lel-	Dada	.1.:	TA7-4	C4:		
	C		•	rtment of							on	
		Wa	ter Qual	ity Monit	toring a	nd Com						
PWS ID	P۱	VS Name					Classif	ication P	opulation	Owner Ty	/pe Pr	rimary Source
CT0300034	4 R0	DSEMAR LLC					N	С	25	Р		GW
Local Addr	ess (whe	re applicable)			Service	Residen	tial Co	mmercial	Industria	l Com	bined	Agricultural
9 ROUTE 6	6				Connection	ns		1				
Towns Serv	ved: COL	UMBIA										
				Monit	oring Red	quireme	nts					
Water Sys	stem Fa	cility: DISTR	IBUTION SY	STEM (WSF	ID: 00600)							
Total Col	iform (3100)							1	routine	(RT)	per quarter
Samp	ling Poir	nt (Sampling P	oint ID)			Monitori	ng Peri	od Col	lection Per	iod C	ompli	ance Status
Select	t from In	ventory of Act	ive Sampling	Points		10/1/18 -	12/31/	18			Co	mplete
						1/1/19 -	3/31/1	9			Co	mplete
						4/1/19 -	6/30/1	9			Co	mplete
						7/1/19 -	9/30/1	9				
Physical	Parame	ters (PPS)							1	routine	(RT)	per quarter
Samp	ling Poir	nt (Sampling P	oint ID)			Monitori	ng Peri	od Col	lection Per	iod C	ompli	ance Status
Select	t from In	ventory of Act	ive Sampling	Points		10/1/18 -	12/31/	18			Co	mplete
						1/1/19 -	3/31/1	9			Co	mplete
						4/1/19 -	6/30/1	9			Co	mplete
						7/1/19 -	9/30/1	9				
Water Sys	stem Fa	cility: ENTR	Y POINT (W	/SF ID: 00700)								
Nitrate A	nd Nitr	ite (NOX)								1 routi	ne (R	T) per year
Samp	ling Poir	nt (Sampling P	oint ID)			Monitori	ng Peri	od Col	lection Per	iod C	ompli	ance Status
ENTR'	Y POINT	(3)				1/1/18 -	12/31/:	18			Co	mplete
						1/1/19 -	12/31/:	19				
						1/1/20 -	12/31/2	20				
			Water Sy	stem Facil	ity and S	ampling	Poin	t Inven	tory			
Water								Tot	al Lead o	and		
System	Water S	ystem Facility	5	Sampling Point	Sampling F	Point		Colife	orm Copp	er		Stage
Facility ID				ID	Description	1	Sta	tus Ru	le Rule 1	Tier Asb	estos	WQP 2 DBPR
00600	DISTRIB	UTION SYSTEM	1	4	DISTRIBUT	ION SYSTEM	A	Y /				
			1	DOWNSTREAM	WITHIN 5 S	SERVICE CON	N A	A				
				UPSTREAM	WITHIN 5 S	SERVICE CON	N A	A				
00700	ENTRY F	POINT		3	ENTRY POI	NT	A	A				
20544	WELL			2	WELL		A	4				
				Cor	ntact Info	rmation						
Name				0	rganization					Job	Title	
Mr. Mark	Gregory				osmar, LLC				Owner			
Mailing Ad		ne One		Mailing Addres					City	Sta	ate	Zip Code
32 Belvede								North Ha	•		Т	06473
Business	Phone	Extension	Fax	Mob	ile Phone	Emergency	Phone					

Contact Role(s): Owner

Commecticu	ι Depa	I tillelit (or r ubiic	Health	וווע	IKIIIg	vvaler	Section	I	
Wate	er Qua	lity Mon	itoring a	and Con	nplia	nce S	Schedul	e		
PWS Name					Classif	ication	Population	Owner Type	Pri	mary Source
ROSEMAR LLC					N	IC	25	Р		GW
here applicable)			Service	Resider	itial Co	mmerci	al Industri	al Combir	ned	Agricultural
			Connections 1							
OLUMBIA			'	'			'	1		
			Organization					Job Tit	le	
Line One		Mailing Addr	ess Line Two				City	State		Zip Code
						North I	Haven	СТ		06473
Extension	Fax	Мо	obile Phone	Emergency	/ Phone	Email Address				
Legal Contact, Ov	vner									
			Organization					Job Tit	le	
ose							Operation	ns Manager		
Line One	Mailing Addr	ess Line Two				City	State		Zip Code	
						Columi	oia	СТ		06237
Extension	Fax	Мо	obile Phone	Emergency	/ Phone	Email A	Address			
				860-336	-9311					
	PWS Name ROSEMAR LLC here applicable) OLUMBIA Line One Extension Legal Contact, Ov ose Line One	Water Qual PWS Name ROSEMAR LLC here applicable) OLUMBIA Line One Extension Fax Legal Contact, Owner ose Line One	Water Quality Mon PWS Name ROSEMAR LLC here applicable) OLUMBIA Line One Mailing Addr e Extension Fax Mo Legal Contact, Owner ose Line One Mailing Addr	Water Quality Monitoring a PWS Name ROSEMAR LLC here applicable) Connection OLUMBIA Organization Line One Mailing Address Line Two Extension Fax Mobile Phone Legal Contact, Owner Organization Organization Mailing Address Line Two Mailing Address Line Two	Water Quality Monitoring and Con PWS Name ROSEMAR LLC here applicable) Service Connections OLUMBIA Organization Line One Mailing Address Line Two Legal Contact, Owner Organization Organization Organization Emergency Address Line Two Dranization Organization Organization Organization Organization Organization Ose Line One Mailing Address Line Two	Water Quality Monitoring and Complia PWS Name ROSEMAR LLC here applicable) Service Connections OLUMBIA Organization Line One Mailing Address Line Two Legal Contact, Owner Organization Organization Organization Mobile Phone Emergency Phone Organization Organization Organization Organization Organization Organization	Water Quality Monitoring and Compliance S PWS Name ROSEMAR LLC here applicable) Service Connections Connections OLUMBIA Organization Line One Mailing Address Line Two Extension Organization Organization	Water Quality Monitoring and Compliance Schedul PWS Name ROSEMAR LLC here applicable) Service Connections Organization City North Haven Extension Fax Mobile Phone Mailing Address Line Two Organization Organization Organization Emergency Phone City North Haven Compliance Schedul Population Population Population Industri Connections 1 Organization Organization	Water Quality Monitoring and Compliance Schedule PWS Name ROSEMAR LLC here applicable) Service Connections Commercial Commercial Industrial Combin Compliance Residential Commercial Industrial Combin Combin Commercial Industrial Combin Combin Commercial Industrial Combin Combin Combin Combin Commercial Industrial Combin Combin Combin Combin Combin Industrial Combin Combin Commercial Industrial Combin Combin Combin Industrial Combin Combin Combin Industrial Ind	ROSEMAR LLC NC 25 P

Connecticut Department of Dublic Health Drinking Water Section

Contact Role(s): Administrative Contact

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
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http://www.ct.gov/dph/publicdrinkingwater

End of schedule

	Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule										
DIA/C ID		Quality Month	or mg and						un on True	Driman Carres	
PWS ID	PWS Name	CATIONIAL CUUDCU		(Primary Source	
CT030006		JATIONAL CHUKCH	C - m d	Danida at	No	_	25		P	GW	
	ress (where applicable)		Service Connections	Residenti	ai Coi	mmercia	I Inc	dustrial	Combine	ed Agricultural	
	& ROUTE 87		Connections			2					
Towns Ser	ved: COLUMBIA										
		Monito	oring Requ	ıiremen	ts						
Water Sy	stem Facility: DISTRIBUT	TION SYSTEM (WSF I	D: 00600)								
Total Co	liform (3100)							1 ro	utine (RT) per quarter	
Samp	oling Point (Sampling Point I	ID)		Monitoring Period Collection Period Compliance Sto							
Selec	t from Inventory of Active Sa	ampling Points		10/1/18 - 1	12/31/	18			(Complete	
				1/1/19 - 3	3/31/1	9			(Complete	
				4/1/19 - 6	5/30/1	9					
				7/1/19 - 9	9/30/1	9					
Physical	Parameters (PPS)							1 ro	utine (RT) per quarter	
Samp	oling Point (Sampling Point I	ID)		Monitorin	g Perio	od Co	llectio	on Period	d Comp	oliance Status	
Selec	t from Inventory of Active Sa	ampling Points		10/1/18 - 12/31/18						Complete	
				1/1/19 - 3	3/31/1	9			(Complete	
				4/1/19 - 6	5/30/1	9					
				7/1/19 - 9	9/30/1	9					
Water Sy	stem Facility: ENTRY PO	INT (WSF ID: 00700)									
Nitrate A	And Nitrite (NOX)							1	routine	(RT) per year	
Samp	oling Point (Sampling Point I	ID)		Monitorin	g Perio	od Co	llectio	on Period	d Com	oliance Status	
ENTR	Y POINT (3)			1/1/18 - 1	2/31/1	18			(Complete	
				1/1/19 - 1	2/31/1	L9			(Complete	
				1/1/20 - 1	2/31/2	20					
	Wa	ter System Facili	tv and Sar	mpling I	Point	Inver	itor	v			
Water		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,			Tot		Lead and	-1		
System	Water System Facility	Sampling Point	Sampling Poi	int		Colif		Copper Copper	4	Stage	
Facility ID		ID	Description		Sta	0.			r Asbesto	s WQP 2 DBPR	
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION	N SYSTEM	Δ		,				
		DOWNSTREAM	WITHIN 5 SER	RVICE CON	Δ	١					
		UPSTREAM	WITHIN 5 SER	RVICE CON	Δ	١					
00700	ENTRY POINT	3	ENTRY POINT	=	Δ	١					
20546	WELL	2	WELL		Δ						
			tact Inforr	mation							
Nome				Hation					Job Title		
Name Mr. Tim A	ndorcon		rganization	ogational C	hursk		Doc:	d of Trus		<u>:</u>	
			olumbia Congre	egational C	nurch					Zin Codo	
	ddress Line One	Mailing Address	S LINE I WO			Columb	Cit	У	State	Zip Code	
P.O. Box 1	.//	325 Route 87				Columb	ld		CT	06237	

Emergency Phone Email Address

ccchurch@snet.net

Mobile Phone

Business Phone

860-228-9306

Extension

Contact Role(s): Administrative Contact

Fax

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

	water Quality Monit	or mg am	u Gon	upi	iance c	Ciicaai	C	
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0300064	COLUMBIA CONGREGATIONAL CHURCH				NC	25	Owner Type P	GW
Local Address	(where applicable)	Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural
ROUTE 66 & R	OUTE 87	Connections			2			
		•	•		•	•	•	

Towns Served: COLUMBIA

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
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http://www.ct.gov/dph/publicdrinkingwater

End of schedule

	Connecticut Dep						_		ection				
		ality Monit	toring an										
PWS ID	PWS Name				Classifi	cation			wner Type	Primary Source			
СТ030007					N		2	5	Р	GW			
	ress (where applicable)		Service	Resident	ial Co	mmerc	ial In	dustrial	Combine	d Agricultural			
152 ROUT	E 66 EAST		Connections			1							
Towns Se	rved: COLUMBIA												
		Monit	oring Requ	uiremer	nts								
Water Sy	stem Facility: DISTRIBUTION	SYSTEM (WSF	ID: 00600)										
Total Co	liform (3100)							1 rc	outine (RT) per quarter			
Sam	pling Point (Sampling Point ID)			Monitorin	ng Perio	od (Collecti	on Perio	Period Compliance Status				
Selec	ct from Inventory of Active Sampli	ng Points		10/1/18 -	12/31/	18			(Complete			
				1/1/19 -	3/31/1	9							
				4/1/19 -	6/30/1	9							
				7/1/19 -	9/30/1	9							
Physical	Parameters (PPS)							1 rc	outine (RT) per quarter			
Sam	pling Point (Sampling Point ID)			Monitorin	ng Perio	od (Collecti	on Perio	d Com	oliance Status			
Selec	ct from Inventory of Active Sampli	ng Points		10/1/18 -	12/31/	18			(Complete			
				1/1/19 -	3/31/1	9							
				4/1/19 -	6/30/1	9							
				7/1/19 -	9/30/1	9							
Water Sy	stem Facility: ENTRY POINT	(WSF ID: 00700))										
	And Nitrite (NOX)								1 routine	(RT) per year			
	pling Point (Sampling Point ID)			Monitorin	ng Perio	od (Collecti	on Perio		oliance Status			
	RY POINT (3)			1/1/18 - 1						Complete			
				1/1/19 - 1						<u>r</u>			
				1/1/20 - 1									
	Water	System Facil	itv and Sa				entor	'V					
Water		•	•				otal	Lead an	nd				
System	Water System Facility	Sampling Point	Sampling Po	int			liform	Coppe	-	Stage			
Facility ID		ID	Description		Sta		Rule			s WQP 2 DBPR			
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTIO	N SYSTEM	Α		Υ						
		DOWNSTREAM	WITHIN 5 SE	RVICE CON	A	Ą							
		UPSTREAM	WITHIN 5 SE	RVICE CON	Α	A							
00700	ENTRY POINT	3	ENTRY POINT	Γ	Δ	4							
20547	WELL	2	WELL										
				matian	,								
			ntact Infor	mation									
Name			rganization						Job Title	2			
Mr. Harm			op River Mote	l			Ow		 				
	ddress Line One	Mailing Addres	ss Line Two				Ci	ty	State	Zip Code			
152 Route	e 66 E		T	Columbia				CT	06237				

Emergency Phone Email Address

Mobile Phone

Business Phone

860-228-4972

Extension

Contact Role(s): Administrative Contact, Legal Contact, Owner

Fax

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

	Tracer Quarty Promes	or mig am	u 0011	TP.	i di i di	on car		
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0300074	HOP RIVER MOTEL				NC	25	Р	GW
Local Address (Local Address (where applicable)			ntial	Commerci	al Industri	al Combine	ed Agricultural
152 ROUTE 66	EAST	Connections			1			
1								

Towns Served: COLUMBIA

Please note the following:

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http://www.ct.gov/dph/publicdrinkingwater

End of schedule

	Connecticut D	epartment of	Public F	lealth	Dr	inki	ng V	Vatei	r Se	ection	
		Quality Monit									
PWS ID	PWS Name		<u> </u>						_	ner Type P	rimary Source
CT030010	4 COLUMBIA TOWN HAL	L				NC		25		Р	GW
Local Addı	ress (where applicable)		Service	Resident	tial	Comm	ercial	Industr	ial	Combined	Agricultura
ROUTE 87			Connections			2					
Towns Ser	ved: COLUMBIA										·
		Monito	oring Requ	uireme	nts						
Water Sy	stem Facility: DISTRIBUTI	ON SYSTEM (WSF I	D: 00600)								
Total Co	liform (3100)								1 rou	utine (RT)	per quarter
Samp	oling Point (Sampling Point ID)		Monitorii	ng Pe	eriod	Colle	ection Pe	eriod	Compl	iance Status
Selec	ct from Inventory of Active San	npling Points		10/1/18 -	12/3	31/18				Co	mplete
				1/1/19 -	3/31	L/19					
				4/1/19 -							
				7/1/19 -	9/30)/19					
-	Parameters (PPS)										per quarter
	oling Point (Sampling Point ID	-		Monitorii			Coll	ection Pe	eriod		iance Status
Selec	t from Inventory of Active San	npling Points		10/1/18 -						Co	omplete
				1/1/19 -							
				4/1/19 -	-	-					
Mator Sv	stem Facility: ENTRY POIN	JT (M/SE ID: 00700)		7/1/19 -	9/30)/19					
	And Nitrite (NOX)	VI (W3F ID. 00700)							1	routine (F	RT) per year
	pling Point (Sampling Point ID)		Monitorii	na Pe	eriod	Colle	ection Pe			iance Status
	RY POINT (3)	,		1/1/18 -	_						mplete
	. ,			1/1/19 - :							'
				1/1/20 - :							
	Wat	er System Facili	ity and Sai	mpling	Poi	int In	vent	orv			
Water		•	•				Tota		l and		
System	Water System Facility	Sampling Point	Sampling Pol	int			Colifo		per		Stage
Facility ID)	ID	Description		9	Status	Rule	e Rule	e Tier	Asbestos	WQP 2 DBP
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTIO	N SYSTEM		Α	Υ				
		DOWNSTREAM	WITHIN 5 SEE	RVICE CON	١	Α					
		UPSTREAM	WITHIN 5 SEE	RVICE CON	١	Α					
00700	ENTRY POINT	3	ENTRY POINT	-		Α					
20549	WELL	2	WELL			Α					
		Con	tact Infor	mation							
Name		Oi	rganization								
Mr. Georg	ge Murphy	own of Columb	ımbia Dir of Public Works					Vorks			

Mr. George Murphy Town of Columbia Dir of Public Works Mailing Address Line One Mailing Address Line Two Zip Code City State 323 Jonathan Trumbull Highway Columbia 06237 **Business Phone** Extension Fax Mobile Phone Emergency Phone Email Address 860-228-4270 gmurphy@columbiact.org 860-228-0327 Contact Role(s): Administrative Contact

(Connectic	ut Depa	rtmer	nt of	Public 1	Health	Drii	nking	, Water	Section			
	Wat	ter Qua	lity M	onite	oring ar	nd Con	nplia	nce S	Schedul	le			
PWS ID F	WS Name						Classif	ication	Population	Owner Type	Primary Source		
CT0300104	OLUMBIA TOW	/N HALL					N	IC	25	Р	GW		
Local Address (wh	ere applicable)				Service	Resider	ntial Co	mmerci	al Industri	al Combine	ed Agricultural		
ROUTE 87					Connection	S		2					
Towns Served: CC	LUMBIA								,				
Name				Or	ganization				Job Title				
Mr. Mark Walter				To	wn of Colum	ıbia			Town Adı	Town Administrator			
Mailing Address L	ine One		Mailing A	Address	Line Two				City	State	Zip Code		
323 Jonathan Tru	mbull Highway							Columi	oia	СТ	06237		
Business Phone	Extension	Fax		Mobil	e Phone	Emergenc	y Phone	Email A	Address	ddress			
860-228-0110		860-228-	1952					townac	dministrator@columbiact.org				
Contact Role(s):	Legal Contact												

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http://www.ct.gov/dph/publicdrinkingwater

End of schedule

	Connecticut De	partment of	Public H	lealth	Drin	king	Wate	r Se	ction	
	Water Q	uality Monit	oring and	d Com	pliai	nce So	chedu	le		
PWS ID	PWS Name	<u> </u>	0						ner Type P	rimary Source
CT0300114	CAMP ASTO WAMAH - L	.ODGE			NO	С	100		Р	GW
Local Addr	ess (where applicable)		Service	Resident	ial Cor	mmercial	Indust	rial	Combined	Agricultural
42 WEST R	OUTE 87		Connections			4				
Towns Serv	ved: COLUMBIA				,			·		·
		Monito	oring Requ	iremer	nts					
Water Sys	stem Facility: DISTRIBUTIO	N SYSTEM (WSF I	D: 00600)							
Total Col	iform (3100)							1 rou	itine (RT)	per quarter
Samp	ling Point (Sampling Point ID)			Monitorin	g Perio	od Col	lection P	eriod	Compli	ance Status
Select	t from Inventory of Active Sam	oling Points		4/1/19 -	6/30/19	9				
				7/1/19 - 9	9/30/19	9				
Physical I	Parameters (PPS)							1 rou	itine (RT)	per quarter
Samp	ling Point (Sampling Point ID)			Monitorin	g Perio	od Col	lection P	eriod	Compli	ance Status
Select	t from Inventory of Active Sam	oling Points		4/1/19 -						
				7/1/19 - 9	9/30/19	9				
Water Sys	stem Facility: ENTRY POIN	Γ (WSF ID: 00700)								
Nitrate A	and Nitrite (NOX)							1	routine (R	T) per year
Samp	ling Point (Sampling Point ID)			Monitorin	g Perio	od Col	lection P	eriod	Compli	ance Status
ENTR	Y POINT (3)			1/1/18 - 1	.2/31/1	.8			Co	mplete
				1/1/19 - 1	.2/31/1	.9				
				1/1/20 - 1	.2/31/2	.0				
		Other Co	ompliance	Sched	ules					
Complianc	e Schedule Activity			D	ue Dat	е	Ach	ieved	Date	
SEASONAL	START UP COMPLETION			4	/1/201	9				
	Wate	r System Facili	ty and Sar	npling	Point	Inven	tory			
Water						Tot		d and		
_	Water System Facility	Sampling Point		nt			orm Co			Stage
Facility ID		ID	Description		Stat			e Tier	Asbestos	WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION		Α	. Y				
		DOWNSTREAM	WITHIN 5 SER	VICE CON	Α					
		UPSTREAM	WITHIN 5 SER	VICE CON	Α	1				
00700	ENTRY POINT	3	ENTRY POINT		Α	L				
47988	WELL #2	2	WELL #2		Α					
57631	HYDRO PNEUMATIC TANK									
		Con	tact Inforr	mation						
Name		01	rganization						Job Title	
Ms. Nancy	Maclean	Ce	enter Church C	amp Asto	Wamak	า	Camp Di	rector	r	
Mailing Ad	dress Line One	Mailing Address	s Line Two				City		State	Zip Code
12 Most Pa	outo 97					Columbi			СТ	06227

Mobile Phone

860-798-8098

Columbia

ntmaclean@gmail.com

Emergency Phone Email Address

CT

06237

42 West Route 87

Business Phone

860-228-3489

Extension

Contact Role(s): Administrative Contact, Legal Contact

Fax

860-647-7829

(Connecticut	t Depa	irtment c	of Public	Health	Drir	ıking	g Water	Section		
	Wate	r Qua	lity Moni	itoring a	nd Con	nplia	nce S	Schedul	le		
PWS ID F	WS Name				Classification Po				Owner Type	Primary Source	
CT0300114 C	AMP ASTO WAM	AH - LODO	GE .			N	IC	100	Р	GW	
Local Address (wh	ere applicable)			Service	Resider	tial Co	mmerci	ial Industri	al Combine	ed Agricultural	
42 WEST ROUTE 8		Connection	ıs		4						
Towns Served: CC	LUMBIA				'	'		'	1	1	
Name				Organization					Job Titl	е	
First Church of Ch	rist In Hartford										
Mailing Address L	ine One		Mailing Addre	ess Line Two				City State Zip Code			
60 Gold Street							Hartfo	rd	СТ	06103	
Business Phone	Business Phone Extension Fax		Мо	bile Phone	Emergency	/ Phone	Email /	Address			
860-249-5631											
Contact Role(s):	Owner		"								

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http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Co	nnectic	ut Departme	nt of	Public	Health F)rin	king	W ₂	ter S	ection	
C		•					U			cction	
2146.12		ter Quality M	IOIIIU	oring a							
	/S Name				C						Primary Source
		Y & BAKE SHOP			5	N(25		Р	GW
Local Address (whe	re applicable)			Service Connection	Residentia	I Cor	nmercia	Ind	dustrial	Combined	l Agricultural
244 ROUTE 6				Connection	15		1				
Towns Served: COL	UMBIA					_		_			
					quirement	is					
•	•	IBUTION SYSTEM	(WSF I	D: 00600)							
Total Coliform (3	-								1 ro		per quarter
Sampling Poin	t (Sampling P	oint ID)			Monitoring	Perio	d Co	llectio	on Period	d Comp	iance Status
Select from Inv	entory of Act	ive Sampling Points			10/1/18 - 12	2/31/1	18			C	omplete
					1/1/19 - 3/	/31/19	9				
					4/1/19 - 6/	/30/19	9				
					7/1/19 - 9/	/30/19	9				
Physical Parame	ters (PPS)								1 ro	utine (RT)	per quarter
Sampling Poin	t (Sampling P	oint ID)			Monitoring	Perio	d Co	llectio	on Period	d Comp	iance Status
Select from Inv	entory of Act	ive Sampling Points			10/1/18 - 12	2/31/1	18			C	omplete
					1/1/19 - 3/	/31/19	9				
					4/1/19 - 6/	/30/19	9				
					7/1/19 - 9/	/30/19)				
Water System Fac	cility: ENTR	Y POINT (WSF ID:	00700)								
Nitrate And Nitri	te (NOX)								1	l routine (RT) per year
Sampling Poin	t (Sampling P	oint ID)			Monitoring	Perio	d Co	llectio	on Period	d Comp	iance Status
ENTRY POINT	(3)				1/1/18 - 12	/31/1	8			C	omplete
					1/1/19 - 12	/31/1	9				
					1/1/20 - 12	/31/2	0				
		Water System	Facili	ity and Sa	ampling P	oint	Inver	tor	y		
Water							Tot	al	Lead and	d	
System Water S	ystem Facility	Samplin	g Point	Sampling P			Colif		Copper		Stage
Facility ID)	Description		Stat	tus Ru	le	Rule Tie	r Asbestos	WQP 2 DBPR
00600 DISTRIBU	JTION SYSTEM	1 4	ı	DISTRIBUTI	ON SYSTEM	Α	. Y	,			
		DOWNS	TREAM	WITHIN 5 S	SERVICE CON	Α					
		UPSTI	REAM	WITHIN 5 S	SERVICE CON	Α					
00700 ENTRY P	OINT	3	3	ENTRY POI	NT	Α					
20558 WELL		2	2	WELL		Α					
			Con	tact Info	rmation						
Name			Oı	rganization						Job Title	
Mr. Santo Motta				lotta's Bake S	Shop						
Mailing Address Lin	e One	Mailing		s Line Two				Cit	У	State	Zip Code
244 Route 6							Columb	а		СТ	06237
Business Phone	Extension	Fax	Mobi	le Phone	Emergency Pl	none	Email A	ddres	S		

860-228-1226

Contact Role(s): Administrative Contact, Legal Contact, Owner

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

	Water Quarty From	or mg am	a don	ipmamee t	onicad		
PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source		
СТ0300194	MOTTAS PASTRY & BAKE SHOP	NC	25	Р	GW		
Local Address (\	Service	Resider	ntial Commerci	al Industri	ial Combine	ed Agricultural	
244 ROUTE 6		Connections		1			

Towns Served: COLUMBIA

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

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http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Clas	sification	Population	Owner Type	Primary Source
CT0300214	SAINT COLUMBA CHURCH				NC	49	Р	GW
Local Address (v	vhere applicable)	Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural
328 JCT. ROUTE	66 & ROUTE 87	Connections			2			

Towns Served: COLUMBIA			
Monitoring	Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 006	00)		
Asbestos (1094)	·	1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/11	1/1-12/31	
Total Coliform (3100)		1 rou	tine (RT) per month
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	11/1/18 - 11/30/18		Complete
	12/1/18 - 12/31/18		Complete
	1/1/19 - 1/31/19		Complete
	2/1/19 - 2/28/19		Complete
	3/1/19 - 3/31/19		Complete
	4/1/19 - 4/30/19		Complete
	5/1/19 - 5/31/19		
	6/1/19 - 6/30/19		
	7/1/19 - 7/31/19		
	8/1/19 - 8/31/19		
	9/1/19 - 9/30/19		
	10/1/19 - 10/31/19		
Physical Parameters (PPS)		1 rou	tine (RT) per month
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	11/1/18 - 11/30/18		Complete
	12/1/18 - 12/31/18		Complete
	1/1/19 - 1/31/19		Complete
	2/1/19 - 2/28/19		Complete
	3/1/19 - 3/31/19		Complete
	4/1/19 - 4/30/19		Complete
	5/1/19 - 5/31/19		
	6/1/19 - 6/30/19		
	7/1/19 - 7/31/19		
	8/1/19 - 8/31/19		
	9/1/19 - 9/30/19		
	10/1/19 - 10/31/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Nitrate And Nitrite (NOX)		1 rc	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		
Water System Facility: WELL (WSF ID: 10810)			
E. Coli (3014)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status

	Connecticut De	epartment of	Public H	lealth D	rinki	ng W	/ater	Section	1		
		uality Monit				U					
PWS ID	PWS Name	<i>.</i>	0		assificati			Owner Type	Prim	nary Source	
CT0300214	SAINT COLUMBA CHUR	СН			NC		49	Р		GW	
Local Addre	ess (where applicable)		Service	Residentia	Comm	ercial	Industria	I Combin	ed A	Agricultural	
328 JCT. RO	OUTE 66 & ROUTE 87		Connections		2						
Towns Served: COLUMBIA											
		Monito	oring Requ	iirement	S						
Water Sys	tem Facility: WELL (WSF	ID: 10810)									
E. Coli (30	014)						1	routine (R	T) pe	r quarter	
Sampl	ling Point (Sampling Point ID)			Monitoring	Period	Collec	ction Peri	iod Con	plian	ce Status	
WELL	(2)		:	10/1/18 - 12/31/18					Complete		
				1/1/19 - 3/	31/19			Complete			
				4/1/19 - 6/	30/19				Com	olete	
				7/1/19 - 9/	30/19						
		Other C	ompliance	Schedul	es						
Compliance	Schedule Activity			Du	e Date		Achiev	ed Date			
CROSS CON	INECTION EXEMPTION			3/1	./2018						
	Wate	r System Facili	ity and Sar	npling P	oint In	vento	ory				
Water						Total	Lead a	and			
-	Water System Facility	Sampling Point		nt		Coliforn	n Copp	er		Stage	
Facility ID		ID	Description		Status	Rule	Rule 1	Tier Asbest	os W	QP 2 DBPI	
00600 I	DISTRIBUTION SYSTEM	4	DISTRIBUTION	N SYSTEM	Α	Υ					

	Water System Facility and Sampling Point Inventory									
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos		Stage DBPR	
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ					
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α						
		MW001	BOYS RM UPSTAIRS	Α	Υ	N				
		MW002	GIRLS RM UPSTAIRS	Α	Υ	N				
		MW003	KITCHEN	Α	Υ	N	Υ			
		MW004	BOYS RM DOWNSTAIRS	Α	Υ	N				
		MW005	GIRLS RM DOWNSTAIRS	Α	Υ	N				
		UPSTREAM	WITHIN 5 SERVICE CON	Α						
00700	ENTRY POINT	3	ENTRY POINT	Α						
10810	WELL	2	WELL	Α						
50895	WELL-X-TROL									

				Contact Inf	ormation					
Name				Organization	1		Job Title			
St Columba Church	l									
Mailing Address Line One Mailing Address			ddress Line Two			City	State	Zip Code		
Route 87						Columbia CT 0			06237	
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Ad	mail Address			
Contact Role(s): O	wner									
Name				Organization	1	Job Title				
Ms. Connie Medeir	os			St Columbia	Church & Daycare		Trustee			
Mailing Address Lin	e One		Mailing Ad	ddress Line Two			City	State	Zip Code	
P.O. Box 38						Columbi	a	СТ	06237	
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Address				
860-228-1205		860-228-	4236		860-428-6285					
Contact Role(s): Le	egal Contact				•					

	Connecticu	ıt Depa	rtment	of Public	Health	n Dri	nking	Water	Section		
	Wat	er Qua	lity Mon	itoring a	nd Cor	nplia	nce S	Schedul	le		
PWS ID F	WS Name					Classi	fication	Population	Owner Type	Primary Source	
CT0300214 S	AINT COLUMBA	CHURCH				1	1C	49	Р	GW	
Local Address (wh	(where applicable)			Service	Reside	ntial Co	ommerci	al Industri	al Combine	ed Agricultural	
328 JCT. ROUTE 6	6 & ROUTE 87			Connection	ns		2				
Towns Served: CC	LUMBIA				'				1	,	
Name				Organization			Job Title				
Father Michael Pl	nillippino			St. Columbia Church				Pastor			
Mailing Address L	ine One		Mailing Addr	ess Line Two				City	State	Zip Code	
328 Jct. Route 66	& Route 87						Columi	oia	СТ	06237	
Business Phone	Extension	Fax	Mo	bile Phone	Emergeno	y Phone	Email A	ail Address			
860-228-3727							phillipp	ino.michae	l@gmail.com		
Contact Role(s):	Administrative C	ontact, Leg	al Contact								

- The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

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End of schedule

Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0300254	RECREATION PARK				NC	25	L	GW
Local Address (v	Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultural	
HENNEQUIN RO	AD	Connections			1			

Towns Served: COLUMBIA

Monitoring Requirements									
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)									
Total Coliform (3100) 1 routine (RT) per qua									
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status						
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete						
	4/1/19 - 6/30/19								
	7/1/19 - 9/30/19								
Physical Parameters (PPS) 1 routine (RT) per quarter									
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status						

Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		

Nitrate And Nitrite (NOX)		1 rc	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18	4/1-12/31	Complete
	1/1/19 - 12/31/19	4/1-12/31	_
	1/1/20 - 12/31/20	4/1-12/31	

Other Compliance Schedules

 Compliance Schedule Activity
 Due Date
 Achieved Date

 SEASONAL START UP COMPLETION
 4/1/2019

	·	Vater System Facili	ty and Sampling P	oint Ir	nventor	у			
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	WQP	Stage 2 DBPR
00600	DISTRIBUTION SYSTEM	2254	CONSESSION STAND	Α	Υ				
		3254	WOMEN'S BATHROOM	Α	Υ				
		4	DISTRIBUTION SYSTEM	Α	Υ				
		4254	MENS BATHROOM	Α	Υ				
		5254	YARD HYDRANT	Α	Υ				
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α					
		UPSTREAM	WITHIN 5 SERVICE CON	Α					
00700	ENTRY POINT	3	ENTRY POINT	Α					
22928	WELL #1	2	WELL	Α					
60325	BLADDER STORAGE								

Contact Information Organization Job Title Name Mr. George Murphy Town of Columbia Dir of Public Works Mailing Address Line One Mailing Address Line Two Zip Code City State 06237 323 Jonathan Trumbull Highway Columbia CTEmergency Phone Email Address **Business Phone** Extension Fax Mobile Phone

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

(Connectic	ut Depa	rtme	ent of	f Public	Health	Dri	nking	g Water	Se	ection	
	Wat	ter Qua	lity N	Monit	toring a	nd Con	nplia	nce S	Schedul	e		
PWS ID F	WS Name						Classi	ication	Population	Ow	ner Type	Primary Source
CT0300254 F	RECREATION PA	RK					ľ	IC	25		L	GW
Local Address (wh	ere applicable)				Service	Residen	tial Co	mmerci	al Industri	al	Combine	d Agricultural
HENNEQUIN ROA	D				Connection	ns		1				
Towns Served: CC	LUMBIA											
860-228-4270 860-228-0327								gmurp	hy@columb	iact.	.org	
Contact Role(s):	Administrative	Contact						•				
Name				О	Organization Job Title)			
Mr. Mark Walter				Т	own of Colun	nbia			Town Administrator			
Mailing Address L	ine One		Mailing	g Addres	ss Line Two				City		State	Zip Code
323 Jonathan Trui	mbull Highway							Colum	Columbia		СТ	06237
Business Phone	Extension	Fax		Mob	ile Phone	Emergency	/ Phone	Email A	Address			
860-228-0110		860-228-2	1952					towna	dministrator	@c	olumbiact	org
Contact Role(s):	Legal Contact				"							

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

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http://www.ct.gov/dph/publicdrinkingwater

End of schedule

	Connecticut De	epartment of	Public He	alth	Dr	inkii	ng W	ater S	ection	
		uality Monit					0			
PWS ID	PWS Name		011119 011101	0011					vner Type	Primary Source
CT0300264	COLUMBIA BEACH HOUS	SE				NC		25	L	GW
Local Address	(where applicable)		Service R	esiden	tial	Comme	ercial I	ndustrial	Combine	d Agricultural
LAKE ROAD			Connections			1				
Towns Served:	: COLUMBIA				·		·			·
		Monito	oring Requir	eme	nts					
Water Syster	m Facility: DISTRIBUTIO	N SYSTEM (WSF I	D: 00600)							
Total Colifor	rm (3100)							1 ro	utine (RT)	per quarter
Sampling	Point (Sampling Point ID)		M	onitori	ng Pe	eriod	Collect	tion Period	d Comp	liance Status
Select fro	om Inventory of Active Sam	oling Points		/1/18 -		-			C	Complete
				/1/19 -						
				/1/19 -						
			7,	/1/19 -	9/30	/19				
-	ameters (PPS)						6 II .			per quarter
	Point (Sampling Point ID)			onitori			Collect	tion Period		liance Status
טואוצוע	ITION SYSTEM (4)			/1/18 - /1/19 -						Complete
				/1/19 -						
				/1/19 -						
Water Syster	m Facility: ENTRY POIN	T (WSF ID: 00700)		1, 13	3,30	7 13				
•	Nitrite (NOX)	,						1	routine (RT) per year
Sampling	Point (Sampling Point ID)		M	onitori	ng Pe	eriod	Collect	tion Period	-	liance Status
ENTRY PO	DINT (3)		1/	1/18 -	12/3:	1/18			C	Complete
			1/	1/19 -	12/3	1/19				
			1/	1/20 -	12/3	1/20				
	Wate	r System Facili	ity and Sam _l	oling	Poi	nt In	vento	ry		
Water							Total	Lead and		
•	iter System Facility		Sampling Point				Coliform			Stage
Facility ID	TRIBLITIONI CVCTENA	ID 2264	Description	ICE.	S	<u>status</u>	Rule	Kule He	r Aspesto.	s WQP 2 DBPF
00600 DIS	TRIBUTION SYSTEM	2264	LIFEGUARD OFF			A	Υ			
		3264 4	WOMENS BATH DISTRIBUTION S			A	Υ			
		4 4264	MENS BATHROO			A A	Υ			
			WITHIN 5 SERVI		NI.	A	ī			
		UPSTREAM	WITHIN 5 SERVI			A				
00700 EN	TRY POINT	3	ENTRY POINT	CL CO1	•	A				
23012 WE		2	WELL			A				
	· 		tact Informa	ation						
Name			rganization	LIUII					Job Title	
Mr. George M	lurphy		own of Columbia				Dir	of Public		
Mailing Addre		Mailing Addres						ity	State	Zip Code

Mailing Address Line One Mailing Address Line Two City Zip Code State 323 Jonathan Trumbull Highway Columbia 06237 CT**Business Phone** Extension Fax Mobile Phone Emergency Phone Email Address 860-228-4270 860-228-0327 gmurphy@columbiact.org Contact Role(s): Administrative Contact

	Connectic	ut Depa	rtme	nt of	Public	Health	Drir	ıking	g Water	Section		
	Wa	ter Qua	lity M	onite	oring a	nd Con	nplia	nce S	Schedul	le		
PWS ID F	WS Name						Classif	ication	Population	Owner Type	Pri	mary Source
CT0300264 C	OLUMBIA BEA	CH HOUSE					N	IC	25	L		GW
Local Address (wh	ere applicable)				Service Residen		ntial Co	mmerci	al Industri	al Combin	ed	ed Agricultural
LAKE ROAD					Connection	IS		1				
Towns Served: CC	LUMBIA						,					
Name				Or	Organization				Job Title			
Mr. Mark Walter				To	Town of Columbia				Town Administrator			
Mailing Address L	ine One		Mailing A	Address	Line Two			City		State		Zip Code
323 Jonathan Trui	mbull Highway							Columb	bia	СТ		06237
Business Phone	Extension	Fax		Mobil	e Phone	Emergenc	y Phone	Email A	Address	,		
860-228-0110		860-228-	1952					townac	dministrator	@columbiac	t.org	5
Contact Role(s):	Legal Contact											

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

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End of schedule

	Water Quality M	Aonitoring an	d Con	npli	iance S	Schedul	e	
PWS ID	PWS Name			Clas	sification	Population	Owner Type	Primary Source
СТ0300274	94 ROUTE 66 - COLUMBIA				NC	33	Р	GW
Local Address	(where applicable)	Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural
		Connections			1			
Towns Served	: COLUMBIA					·		
	N	Monitoring Requ	uireme	nts				
Water Syste	m Facility: DISTRIBUTION SYSTEM	(WSF ID: 00600)						
Tatal Califa	···· (2400)					-		r\

Connecticut Department of Public Health Drinking Water Section

Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)			
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		

Water System Facility: ENTRY POINT (WSF ID: 00700)			
Nitrate And Nitrite (NOX)		1 rc	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/19 - 12/31/19	4/1-12/31	
	1/1/20 - 12/31/20	4/1-12/31	

	Water System Facility and Sampling Point Inventory												
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos		Stage 2 DBPR				
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ								
00700	ENTRY POINT	3	ENTRY POINT	Α									
47980	WFLL #1	2	WFLL #1	Α									

				Contact Inf	ormation					
Name				Organization	1		Job Title			
Mr. Steve Harringto	on			The Main M						
Mailing Address Lin	e One	Mailing Address Line Two				City		State	Zip Code	
94 Rt 66 East						Columbia		СТ	06237	
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Add	lress			
						sharringto	gton@iafdinc.com			

Contact Role(s): Administrative Contact, Legal Contact, Owner

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
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End of schedule

	Connecticut I	Department of	Public Health I	Orink	ing Wa	ater Se	ction	
	Water	Quality Monit	oring and Com	oliano	ce Sche	edule		
PWS ID	PWS Name						ner Type Pi	rimary Source
СТ0309094	ICA DONUTS, LLC			NC	2		P	GW
Local Addre	ess (where applicable)		Service Residenti	al Comn	nercial In	dustrial	Combined	Agricultural
221 WILLIM	IANTIC ROAD		Connections		1			
Towns Serv	ed: COLUMBIA					'		
		Monito	oring Requiremen	ts				
Water Syst	tem Facility: DISTRIBUT	TION SYSTEM (WSF I	D: 00600)					
Total Coli	form (3100)					1 rou	tine (RT) _I	er quarter
Sampl	ing Point (Sampling Point I	(D)	Monitoring	g Period	Collecti	ion Period	Compli	ance Status
Select	from Inventory of Active Sa	ampling Points	10/1/18 - 1	2/31/18			Co	mplete
			1/1/19 - 3	/31/19				
			4/1/19 - 6	/30/19				
			7/1/19 - 9	/30/19				
Physical P	arameters (PPS)					1 rou	tine (RT) ا	oer quarter
Sampl	ing Point (Sampling Point I	(D)	Monitoring	-	Collecti	ion Period	Compli	ance Status
Select	from Inventory of Active Sa	ampling Points	10/1/18 - 1	2/31/18			Co	mplete
			1/1/19 - 3					
			4/1/19 - 6	-				
			7/1/19 - 9	/30/19				
Water Syst	tem Facility: ENTRY PO	INT (WSF ID: 00700)						
	nd Nitrite (NOX)					1	=	T) per year
	ing Point (Sampling Point I	ID)	Monitoring		Collecti	ion Period	Compli	ance Status
ENTRY	POINT (3)		1/1/18 - 12				Co	mplete
			1/1/19 - 1					
			1/1/20 - 1	2/31/20				
	Wa	ter System Facili	ty and Sampling F	Point I	nventor	У		
Water						Lead and		
	Water System Facility	Sampling Point			Coliform	Copper		Stage
Facility ID		ID	Description	Status	Rule	Rule Tier	Asbestos	WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION	Α				
			WITHIN 5 SERVICE CON	Α				
		UPSTREAM	WITHIN 5 SERVICE CON	Α				
	ENTRY POINT	3	ENTRY POINT	Α				
50440 \	WELL #1	2	WELL #1	Α				
50444 E	BLADDER TANKS							
		Con	tact Information					
Name		Oı	ganization				Job Title	
Ms. Frances	s T. James	Ica	Donuts, LLC, 221 Willim	ant	Ow	ner		

			Co	ontact Inf	ormation				
Name				Organization	ı			Job Title	
Ms. Frances T. Jam	es			Ica Donuts, I	LC, 221 Willimant	Owner			
Mailing Address Lin	e One	ess Line Two		City	State	Zip Code			
			14 Grand Pla	ce		Newtow	/n	СТ	06470
Business Phone	Extension	Fax	Mo	bile Phone	Emergency Phone	Email Ad	ddress	,	
203-426-6888					203-509-0491				
Contact Role(s): Le	egal Contact. O	wner							

(Connectic	ut Depa	ırtme	nt of	Public	Health	ı Drii	ıking	g Water	Section	
	Wat	ter Qua	lity M	Ionito	oring a	nd Con	nplia	nce S	Schedul	le	
PWS ID	PWS Name						Classif	ication	Population	Owner Type	Primary Source
CT0309094 I	CA DONUTS, LL	С					N	IC	25	Р	GW
Local Address (wh	nere applicable)				Service	Resider	ntial Co	mmerci	al Industri	al Combine	ed Agricultural
221 WILLIMANTIC	CROAD				Connection	ıs		1			
Towns Served: CO	DLUMBIA					'	'		"	'	1
Name				Or	ganization					Job Titl	е
Mr. Richard D. M	cCarthy			Ica	Donuts, LLC	C			Manager		
Mailing Address L	ine One		Mailing	Address	Line Two				City	State	Zip Code
			100 Eas	t Main S	treet			Plainvi	lle	СТ	06062
Business Phone	Extension	Fax		Mobile	e Phone	Emergenc	y Phone	Email A	Address	,	
860-793-6955	222	860-793-	6896			860-793	-6955	rich@g	gadonut.con	n	
Contact Role(s):	Administrative	Contact									

Contact Role(s). Administrative Conta

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

	Connecticut Department of Public Health Drinking Water Section												
	Water Quality Monitoring and Compliance Schedule												
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source					
СТ0309104	T0309104 CAMP ASTO WAMAH - INFIRMARY NC 100 P GW												
Local Address	ocal Address (where applicable) Service Residential Commercial Industrial Combined Agricultural												

42 WEST R	ROUTE 87			Connections		2				
Towns Ser	ved: COLUMBIA									
		Mo	onito	ring Requ	uirement	ts				
Water Sys	stem Facility: DISTRIBUTIC									
•	liform (3100)	•		•				1 r	outine (RT)	per month
	oling Point (Sampling Point ID)				Monitoring	Period	Collect	ion Perio		ance Status
Selec	t from Inventory of Active Sam	pling Points			6/1/19 - 6,	/30/19				
					7/1/19 - 7,	/31/19				
					8/1/19 - 8,	/31/19				
Physical	Parameters (PPS)							1 r	outine (RT)	per month
Samp	oling Point (Sampling Point ID)				Monitoring	Period	Collect	ion Perio	d Complic	ance Status
Selec	t from Inventory of Active Sam	pling Points			6/1/19 - 6,	/30/19				
					7/1/19 - 7,	/31/19				
					8/1/19 - 8,	/31/19				
Water Sys	stem Facility: ENTRY POIN	T (WSF ID: 00	700)							
Nitrate A	And Nitrite (NOX)								1 routine (R	T) per year
Samp	oling Point (Sampling Point ID)				Monitoring	Period	Collect	ion Perio	d Complic	ance Status
ENTR	Y POINT (3)				1/1/18 - 12	2/31/18			Cor	mplete
					1/1/19 - 12	2/31/19				
					1/1/20 - 12	/31/20				
		Othe	er Co	mpliance	Schedu	les				
Complianc	ce Schedule Activity				Du	e Date		Achieve	d Date	
SEASONAL	START UP COMPLETION				6/	1/2019				
		Public	Noti	fication R	Requiren	nents				
			Со	mpliance	Notice	Publ	ic Notifica	ation	PN Certi	<u>ification</u>
Violation/	'Situation			Period	Tier	Requi	red Per	formed	Due to DPH	Received
E. Coli			8/1/2	18 - 8/31/18	3	11/13/2	2019		11/23/2019	
	Wate	er System F	acilit	ty and Sai	mpling P	oint In	vento	ry		
Water		-					Total	Lead an	nd	
System	Water System Facility	Sampling I	Point	Sampling Poi	int		Coliform	Coppe	r	Stage
Facility ID		ID		Description		Status	Rule	Rule Tie	er Asbestos	WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4		DISTRIBUTIO	N	Α				
		DOWNSTR	REAM	WITHIN 5 SEF	RVICE CON	Α				
		UPSTREA	AM	WITHIN 5 SEF	RVICE CON	Α				
00700	ENTRY POINT	3		ENTRY POINT	<u> </u>	Α				
47000	=					_			-	

37010 52715521	,								
			Co	ntact Inf	ormation				
Name				Organization				Job Title	2
Ms. Nancy Maclear	1		Center Churc	ch Camp Asto Wamal	า	Camp Director			
Mailing Address Lin	e One		Mailing Addr	ess Line Two			City	State	Zip Code
2 West Route 87						Columbi	a	CT	06237
Business Phone	Extension	Fax	Mo	bile Phone	Emergency Phone	Email Ac	ldress		

WELL 3

2

47990 WELL 3

57640 BLADDER TANK

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

	Connecticut Department of Public Health Drinking Water Section												
	Wa	ter Quality M	Ionit	oring an	d Con	npl	liance S	Schedul	le				
PWS ID	PWS Name					Cla	ssification	Population	Owner Type	Primary Source			
CT0309104 CAMP ASTO WAMAH - INFIRMARY NC 100 P G/									GW				
Local Address (w	here applicable)			Service	Resider	ntial	Commerci	al Industri	al Combin	ed Agricultural			
42 WEST ROUTE	87			Connections			2						
Towns Served: C	OLUMBIA							,					
860-228-3489	860-228-3489 860-647-7829 860-798-8098 ntmaclean@gmail.com												
Contact Role(s):	Administrative	Contact, Legal Conta	act										

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

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http://www.ct.gov/dph/publicdrinkingwater

End of schedule

	Connecticut	Denartmer	nt of	Public H	ealth	Dr	inking	Water	٠ ٢	ection	
		r Quality Mo					`				
PWS ID	PWS Name	1 Quality Wi	OIIIC	Ji ilig alii	a Gon	_			_	vner Type	Primary Source
CT030911		AH - HUNGERFORD					NC	100		Р	GW
Local Add	ress (where applicable)			Service	Residen	ntial	Commerc	ial Industr	ial	Combine	d Agricultur
42 WEST I	* * * * * * * * * * * * * * * * * * * *			Connections			2				
Towns Sei	ved: COLUMBIA							l		I	l
		M	onito	ring Requ	ireme	nts					
Water Sy	stem Facility: DISTRIB	UTION SYSTEM (WSF IC): 00600)							
Total Co	liform (3100)							:	l ro	utine (RT)	per quartei
Sam	oling Point (Sampling Poin	t ID)			Monitori	ing P	eriod (Collection Pe	riod	l Comp	liance Status
Selec	t from Inventory of Active	Sampling Points			4/1/19 -	- 6/30	0/19				
					7/1/19 -	- 9/30	0/19				
Physical	Parameters (PPS)							:	l ro	utine (RT)	per quartei
Samj	oling Point (Sampling Poin	t ID)			Monitori	ing P	eriod (Collection Pe	rioc	l Comp	liance Status
Selec	t from Inventory of Active	Sampling Points			4/1/19 -						
					7/1/19 -	- 9/30	0/19				
Water Sy	stem Facility: ENTRY P	OINT (WSF ID: 0	0700)								
	And Nitrite (NOX)								1	-	RT) per yeaı
	oling Point (Sampling Poin	t ID)			Monitori			Collection Pe	rioc	l Comp	liance Status
ENTF	RY POINT (3)				1/1/18 -		-			С	omplete
					1/1/19 -						
					1/1/20 -		•		_		
		Oth	er Co	mpliance	Sched	dule	es				
Complian	ce Schedule Activity					Due	Date	Achie	eved	l Date	
SEASONA	L START UP COMPLETION					6/1/2	2019				
		Public	Noti	fication R	equire	eme	ents				
			Со	mpliance	Notice	?	<u>Public N</u>	<u>lotification</u>		PN Ce	rtification
Violation,	/Situation			Period	Tier		Required	Performe	ed .	Due to DPI	H Received
REVISED T	OTAL COLIFORM RULE (RT	CR)	6/2/	17 - 7/7/17	3	1	.0/13/2018	3 10/26/20	17	10/23/201	3 1/23/2019
	W	ater System F	Facilit	ty and Sar	npling	Po	int Inve	entory			
Water							Т	otal Lead	and	1	
System	Water System Facility			Sampling Poil	nt			iform Cop	•		Stage
Facility ID		ID		Description			Status	Rule Rule	Tie	r Asbestos	WQP 2 DBF
00600	DISTRIBUTION SYSTEM	4		DISTRIBUTION			A				
				WITHIN 5 SER			A				
		UPSTRE		WITHIN 5 SER	VICE COI	N	A				
00700	ENTRY POINT	3		ENTRY POINT			A				
47992	WELL 4	2		WELL 4			Α				
57635	HYDRO PNEUMATIC TAN	K									
			Cont	tact Inforr	nation	1					
Name			Org	ganization						Job Title	
Ms. Nanc	y Maclean		Cei	nter Church C	amp Asto) Wa	mah	Camp Dir	ecto	or	
Mailing A	ddress Line One	Mailing A	Address	Line Two				City		State	Zip Code

Mobile Phone

860-798-8098

Fax

860-647-7829

Extension

Columbia

ntmaclean@gmail.com

Emergency Phone Email Address

CT

06237

42 West Route 87

Business Phone

860-228-3489

0	Connecticu	t Depa	rtment of	Public	Health	Drin	nking	Water	Section	
	Wate	er Qua	lity Monit	oring ar	nd Con	nplia	nce S	Schedul	le	
PWS ID	PWS Name					Classif	ication	Population	Owner Type	Primary Source
CT0309114	CAMP ASTO WAM	AH - HUN	GERFORD			N	IC	100	Р	GW
Local Address (w	here applicable)			Service	Resider	ntial Co	mmerci	al Industri	al Combine	ed Agricultural
42 WEST ROUTE	87			Connection	S		2			
Towns Served: C	OLUMBIA									
Contact Role(s):	Administrative Co	ntact, Leg	al Contact							
Name			Oi	rganization					Job Titl	e
First Church of C	hrist In Hartford									
Mailing Address	Line One		Mailing Address	s Line Two				City	State	Zip Code
60 Gold Street							Hartfo	rd	СТ	06103
Business Phone	e Extension	Fax	Mobi	le Phone	Emergency	/ Phone	Email A	Address	,	
860-249-5631										
Contact Role(s):	Owner			,						

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http://www.ct.gov/dph/publicdrinkingwater

End of schedule

C		ut Departm					_	_		ection	
	Wa	ter Quality	Monit	oring a	nd Comp	oliai	nce S	Sche	edule		
PWS ID P	WS Name				С	lassific	cation	Popu	lation Ow	ner Type	Primary Sou
CT0309124 5	2 ROUTE 66					NO	С	2	5	Р	GW
Local Address (wh	ere applicable)			Service	Residentia	l Cor	nmerci	ial In	dustrial	Combine	ed Agricultu
				Connection	ns		1				
Towns Served: CO	LUMBIA					,		·			
			Monit	oring Red	quirement	ts					
Water System Fa	cility: DISTR	RIBUTION SYSTEM	1 (WSF I	D: 00600)							
Total Coliform	(3100)								1 rou	ıtine (RT) per quart
Sampling Poi	nt (Sampling P	Point ID)			Monitoring	Perio	od C	Collecti	ion Period	Comp	oliance Statu
Select from Ir	ventory of Act	ive Sampling Point	5		10/1/18 - 12	2/31/1	18			(Complete
					1/1/19 - 3/	/31/19	9				
					4/1/19 - 6/	/30/19	9				
					7/1/19 - 9/	/30/19	9				
Physical Parame	eters (PPS)								1 rou	ıtine (RT) per quart
Sampling Poi	nt (Sampling P	Point ID)			Monitoring	Perio	od C	ollecti	on Period	Comp	oliance Statu
Select from Ir	ventory of Act	ive Sampling Point	5		10/1/18 - 12	2/31/1	18			(Complete
					1/1/19 - 3/	/31/19	9				
					4/1/19 - 6/	/30/19	9				
					7/1/19 - 9/	/30/19	9				
Water System Fa	cility: ENTR	Y POINT (WSF ID	: 00700)								
Nitrate And Nit	rite (NOX)								1	routine	(RT) per ye
	nt (Sampling P	oint ID)			Monitoring	Perio	od C	ollecti	on Period		oliance Statu
ENTRY POINT	(3)				1/1/18 - 12	/31/1	.8			(Complete
					1/1/19 - 12						·
					1/1/20 - 12						
		Water System	n Facil	ity and S				ntor	'V		
Water		Trate: Oyote.		icy and o	ab9 .	••		otal	Lead and		
	System Facility	Sampl	ina Point	Sampling F	Point				Copper		Sta
Facility ID	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		ID	Description		Stat		Rule		Asbesto	s WQP 2 DI
00600 DISTRIE	SUTION SYSTEM	1	4	DISTRIBUTI	ION	A					
		DOWI	NSTREAM	WITHIN 5 S	SERVICE CON	Α					
			TREAM		SERVICE CON	Α					
00700 ENTRY	POINT		3	ENTRY POI	NT	Α					
53179 WELL 1			2	WELL 1		A					
33173 WEEE 1				tact Info	rmation		`				
Name				rganization	- mation					Job Title	
Mr. Albert P. Shifr	in		U	i gariizatiUII				Ow	ner	וווו מטנ	
Mailing Address Li		Mailie	ng Addres	s Line Two				Ci		State	Zip Code
P.O. Box 132	ile Olle	ividilli	ig Addies	3 LITIC TWU			Colum		Ly	CT	06237
Business Phone	Evtoncion	Eav	Mah	le Phone	Emergonov D				e c	CI	00237
business Priorie	Extension	Fax	IVIODI	ie Pilofie	Emergency Pl	ione	LIIIdii i	Audres	55		

860-228-9343

userchick@aol.com

860-228-9556

Contact Role(s): Administrative Contact, Legal Contact, Owner

860-228-9343

(Connecticut Department of Public Health Drinking Water Section
	Water Quality Monitoring and Compliance Schedule

	water Quarty Month	a Gon	1P1	idifec t	ciicaai	C		
PWS ID	PWS Name	Classification		Population	Owner Type	Primary Source		
CT0309124	T0309124 52 ROUTE 66						Р	GW
Local Address (v	Local Address (where applicable)			itial	Commerci	al Industri	al Combine	ed Agricultural
		Connections			1			

Towns Served: COLUMBIA

Please note the following:

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http://www.ct.gov/dph/publicdrinkingwater

End of schedule

	Carradia			יו ווי די	(- 1/1 D	1	ν , τ	A.7 - 1	21:		
	Connecticut De Water Q	•					_				
PWS ID	PWS Name	<u> </u>								Primary Source	
CT0309134	BECKISH SENIOR CENTER	R				NC		25	L	GW	
Local Address (where applicable)			Service	Residentia	l Comm	ercial	Industria	Combine	d Agricultura	
188 ROUTE 66				Connections		1	_			_	
Towns Served:	COLUMBIA									1	
		Mo	onito	oring Requ	iirement	:S					
Water System	Facility: DISTRIBUTIO	N SYSTEM (\	NSF I	D: 00600)							
Total Coliforn	n (3100)							1 :	outine (RT) per quarter	
Sampling	Sampling Point (Sampling Point ID)					Period	Coll	ection Peri	od Com	oliance Status	
Select fron	Select from Inventory of Active Sampling Points					2/31/18			(Complete	
					1/1/19 - 3/	31/19					
					4/1/19 - 6/	30/19					
					7/1/19 - 9/	30/19					
Physical Para	meters (PPS)							1 :	outine (RT) per quarter	
Sampling I	Point (Sampling Point ID)				Monitoring	Period	Coll	ection Peri	od Comp	oliance Status	
Select fron	n Inventory of Active Samp	oling Points			10/1/18 - 12	2/31/18			(Complete	
					1/1/19 - 3/	31/19					
					4/1/19 - 6/	30/19					
					7/1/19 - 9/	30/19					
Water System	Facility: ENTRY POINT	(WSF ID: 00	700)								
Nitrate And N	Nitrite (NOX)								1 routine	(RT) per year	
Sampling I	Point (Sampling Point ID)				Monitoring Period Collection Period Com					pliance Status	
ENTRY PO	INT (3)				1/1/18 - 12/31/18 Complete						
					1/1/19 - 12	/31/19					
					1/1/20 - 12	/31/20					
		Public	Not	ification R	equirem	ents					
			C	ompliance	Notice	Publ	ic Noti	<u>fication</u>	PN Ce	ertification	
Violation/Situa	rtion			Period	Tier	Required Performed Due to DPH R			H Received		
Nitrate And Nit	rite M&R Violation		1/1/	10 - 12/31/10	2	4/7/20)11		4/17/201	1	
	Wate	r System F	acili	ty and Sar	npling P	oint Ir	ivent	tory			
Water							Tota	l Lead a	nd		
•	er System Facility		Point	Sampling Poi	nt		Colifo			Stage	
Facility ID		ID		Description		Status	Rule	e Rule T	ier Asbesto	s WQP 2 DBP	
00600 DIST	RIBUTION SYSTEM	4		DISTRIBUTION	BUTION SYSTEM A Y						
		DOWNSTF	REAM	WITHIN 5 SEF	RVICE CON	Α					
		UPSTRE	AM	WITHIN 5 SEF	RVICE CON	Α					

00700 ENTRY P	OINT		3	3	ENTRY PO	INT A	١			
50011 WELL 1			2	2	WELL 1	Δ	١			
				Co	ntact Info	ormation				
Name				(Organization				Job Title	
Mr. George Murph	у			1	Γown of Colu	mbia		Dir of Public	Works	
Mailing Address Lin	e One		Mailing	Addre	ss Line Two			City	State	Zip Code
323 Jonathan Trum	bull Highway						Columbi	a	СТ	06237
Business Phone	Extension	Fax		Mol	oile Phone	Emergency Phone	Email Ad	ldress		
860-228-4270		860-228-0	0327				gmurphy	/@columbiac	t.org	
Contact Role(s): A	dministrative	Contact								

(Connectic	ut Depa	rtme	nt of	Public	Health	Drii	nking	Water	Section	
	Wa	ter Qua	lity M	onite	oring ar	nd Con	nplia	nce S	Schedul	le	
PWS ID F	PWS Name						Classif	ication	Population	Owner Type	Primary Source
CT0309134	BECKISH SENIOR CENTER						N	IC	25	L	GW
Local Address (wh	ere applicable)				Service	Resider	ntial Co	mmerci	al Industri	al Combine	ed Agricultural
188 ROUTE 66					Connection	S		1			
Towns Served: CC	LUMBIA								,		
Name				Or	Organization Job Title					e	
Ms. Carmen L. Va	nce			To	Town of Columbia				First Selectman		
Mailing Address L	ine One		Mailing A	Address	ess Line Two			City		State	Zip Code
323 Jonathan Tru	mbull Highway		Route 87	7				Columi	oia	СТ	06237
Business Phone	Extension	Fax		Mobil	lobile Phone Emergence			Email A	Email Address		
860-228-0110		860-228-2	1952			860-336	-8119	-8119 cvance@columbiact.org			
Contact Role(s):	Legal Contact										

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End of schedule

		•	Public Health I		_		ction	
PWS ID	PWS Name	eddiity 140111t					ner Tyne F	rimary Source
CT030914		IIMRIA		NC	19		P	GW
	ress (where applicable)	OIVIDIA	Service Residentia	_		dustrial	Combined	
Local Add	ress (where applicable)		Connections	1		luustiiai	Combined	Agricultural
Towns Sou	ved: COLUMBIA		Connections					
TOWIS SEI	veu. COLOIVIBIA	B.4*1	·					
Water Sv	stem Facility: DISTRIBUTIO		oring Requirement	ts				
	liform (3100)	511 51 51 51 Elli (1151 II	2.00000			1 rou	tino (PT)	per quarter
	oling Point (Sampling Point ID)	Monitoring	Period	Collecti	ion Period		iance Status	
	ct from Inventory of Active Sam		10/1/18 - 1		Conecti	on renou		omplete
36160	t Holli lilvelitory of Active Sair	ipinig roints	1/1/19 - 3				Cl	Jilpiete
			4/1/19 - 6					
			7/1/19 - 9					
Dharaitani	Davis and ADDC)		7/1/19 - 9/	/30/19		4	(DT)	
-	Parameters (PPS)	1	Monitorina	Dorlod	Callasti	ı rou ion Period		per quarter
	oling Point (Sampling Point ID) It from Inventory of Active Sam		Monitoring 10/1/18 - 1		Conecu	on Perioa		iance Status
Selec	it from inventory of Active Sair	ipiilig Politis		<u> </u>			C	omplete
			1/1/19 - 3					
			4/1/19 - 6					
M	alone For all FALTRY BOIL	T (MCE ID 00700)	7/1/19 - 9	/30/19				
	stem Facility: ENTRY POIN	II (WSF ID: 00700)						
	And Nitrite (NOX)				- 4			RT) per year
	oling Point (Sampling Point ID)		_	Monitoring Period Collection Period Comp				
ENTF	RY POINT (3)			1/1/18 - 12/31/18				
			1/1/19 - 12					
			1/1/20 - 12	2/31/20				
	Wate	er System Facili	ty and Sampling P	oint In	ventor	У		
Water					Total	Lead and		
System	Water System Facility	Sampling Point			Coliform	Copper		Stage
Facility ID		ID	Description	Status	Rule	Rule Tier	Asbestos	WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α				
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α				
		UPSTREAM	WITHIN 5 SERVICE CON	Α				
00700	ENTRY POINT	3	ENTRY POINT	Α				
59456	WELL 1	2	WELL 1	Α				
59637	TREATMENT PLANT							
		Con	tact Information					
Name		Or	rganization				Job Title	
	en Moran							
Mailing A	ddress Line One	Mailing Address	s Line Two		Ci	ty	State	Zip Code
106 Route		<u> </u>		Col	lumbia	<u>, </u>	СТ	06237
Pusinos		Fay Mobil	lo Phono Emorgonov D		ail Addro			

Emergency Phone Email Address

info@crossroadsphysicaltherapy.org

860-208-1498

Mobile Phone

Business Phone

860-228-0194

Extension

Contact Role(s): Administrative Contact, Legal Contact, Owner

Fax

860-228-2694

Connecticut Department of Public Health	Drinking	g Water	Sec	tion	
Water Quality Monitoring and Con	npliance S	Schedul	e		
	-1 .6		_		

	Tracer Quartey From	91 11118 arri	4 0011	TP.	idiioo t	onean		
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0309144	CORNERSTONE OF COLUMBIA				NC	193	Р	GW
Local Address (v	Service	Residen	ntial Commerc		al Industri	al Combine	ed Agricultural	
		Connections			1			

Towns Served: COLUMBIA

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

	Co		ut Departmei ter Quality M					U			1	
PWS ID	P\Λ	'S Name	ter quarry 1.1	01111	orms a						p Pr	imary Source
CT0309154			ARM & WINERY, LLC				N		25	P P	- 11	GW
		e applicable)			Service	Residenti		mmercia		•	ned.	Agricultural
468 RT. 87, 0					Connection		ai Co	mmercia	illuustila	1	ieu	Agricultural
Towns Serve					0011110001101					1		
TOWIS Serve	u. COL	JIVIDIA				•	•					
Water Syst	em Fac	ility: DISTR	IVI RIBUTION SYSTEM (quiremen	τς					
Total Colif		•		••••	D. 00000,				1 .	routine (R	T) r	er quarter
	•	t (Sampling P	Point ID)			Monitoring	n Perio	nd Co	ollection Peri	' - '		ince Status
			ive Sampling Points			10/1/18 - 1				ou con	•	nplete
Jelecti	TOTTI IIIV	entory of Act	ive sampling rollies			4/1/19 - 6					COI	прісте
						7/1/19 - 9						
Dhusiaal D		ove (DDC)				7/1/19 - 5	730/1	9	1.		T\	
Physical Pa			laint ID			Monitoria	n Doni	-d C	۱ د Ollection Peri	-		er quarter Ince Status
	BUTION	t (Sampling P				Monitoring 10/1/18 - 1			mection Peri	ou con		
ואונוט	BUTION	(4)				4/1/19 - 6					COI	nplete
						· ·	• •					
M/ - 1 C 1		The FAITS	V DOINT (WEELD O	0700\		7/1/19 - 9	/30/1	9				
•		•	Y POINT (WSF ID: 0	0700)								-
Nitrate An		• •									-	Γ) per year
	_	t (Sampling P	Point ID)			Monitoring			ollection Peri	od Con		ince Status
ENTRY	POINT (3)				1/1/18 - 1					Cor	nplete
						1/1/19 - 1						
						1/1/20 - 1	2/31/2	20				
			Public	T		Requirer						
				C	ompliance	Notice			<u>otification</u>			<u>fication</u>
Violation/Si			(2702)	1/10	Period	Tier		quired	Performed			Received
REVISED TO	TAL COL	IFORM RULE	, ,		5/18 - 5/25/1 -			5/2019		6/16/20	19	
			Water System	Facili	ity and S	ampling F	Point	t Inve	ntory			
Water									tal Lead a	ınd		
	Vater Sy	stem Facility		Point	Sampling F				form Coppe			Stage
Facility ID			ID		Description		Sta	tus	ule Rule T	ier Asbes	tos	WQP 2 DBPR
00600 D	DISTRIBU	TION	4		DISTRIBUTI		P	A				
			DOWNST			ION DOWNST	R A	Α	Υ			
			UPSTRI	EAM	DISTRIBUTI	ION UPSTRE	P	١	Υ			
00700 E	NTRY PO	DINT	3		ENTRY POI	NT	P	A				
60665 V	VELL		2		WELL		A	A				
				Con	tact Info	rmation						
Name				0	rganization					Job Tit	le	
Mr. Walter	A. Tabo	r		Н	eartstone Fa	rm & Winery	LLC					
Mailing Add	ress Line	e One	Mailing /	Addres	s Line Two	·			City	State	9	Zip Code
544 Rt 87								Columb		СТ		06237
Business P	hone	Extension	Fax	Mobi	le Phone	Emergency F	hone	Email A	ddress		1	
								1				

860-933-1099

walteratabor@gmail.com

860-933-1605

Contact Role(s): Administrative Contact, Legal Contact, Owner

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

		- 0					
PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT0309154	HEARTSTONE FARM & WINERY, LLC			NC	25	Р	GW
Local Address (v	Service	Resider	ntial Commerci	al Industri	al Combine	ed Agricultural	
468 RT. 87, COL	UMBIA	Connections				1	

Towns Served: COLUMBIA

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